SEC 1972 (6-02)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.





#### OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response 16.0

SEC USE ONLY								
Prefix	Serial							
DATE RECEIVED								

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

7	PROCESSED
7	PROCESSED

UNIFORM LIMITED OFFERING EXEMPTION Name of Offering ( check if this is an amendment and name has changed, and indicate change.) Newport Asia Advisors Fund, LP Filing Under (Check box(es) that apply): □ Rule 504 Rule 505  $\boxtimes$ Rule 506 Section 4(6) Type of filing:  $\boxtimes$ New Filing Amendment

j	A.	BASIC	<b>IDEN</b>	TIFICA	TION	DATA

Enter the information requested about the issuer

Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)

Newport Asia Advisors Fund, LP

Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)

601 California Street, Suite 600, San Francisco, CA 94108 415/677-8620 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)

(if different from Executive Offices)

Brief Description of Business Private investment fund

Type of Business Organization

corporation

limited partnership, already formed

other (please specify): LLC

business trust limited partnership, to be formed

Actual or Estimated Date of Incorporation or Organization:

Month Year [02]

[ 12 ]

[X] Actual [] Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

CN for Canada; FN for other foreign jurisdiction)

[D] [E]

## GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate

state	s in acc	cordance with state	law. T	he Appendix to	the notic	e constitutes a part of	this notice	and must be complet	ed.			
					2	A. BASIC IDENT	TIFICAT	ION DATA				
2.	Ente	Each beneficia the issuer; Each executive	r of the al owner e office	issuer, if the ir having the por r and director	ssuer ha	as been organized v	direct the		·			s of equity securities or issuers; and
Che	ck Box	x(es) that Apply	<b>P</b> ts Nati	□ Promote	eren e	Beneficial Owne	er 🗆	Executive Officer		Director	×	General and/or Managing Partner
Full Mu	Name ssey T	(Last name firs uttle Asia Parti	t, if ind ners, L	ividual) LC								
		or Residence Adornia Street, Su		(Number an San Francis	d Street co, CA	, City, State, Zip C 94108	ode)					
Che	ck Box	k(es) that Apply:		□ Promote	r 🗆	Beneficial Owne	er 🗵	Executive Officer		Director		General and/or Managing Partner
		(Last name first ohn Miller	t, if ind	ividual)								
		r Residence Adornia Street, Su		(Number an San Francis	d Street	, City, State, Zip C 94108	Code)					
Che	ck Box	c(es) that Apply:	i	□. Promote	r 🗆	Beneficial Owner	r X	Executive Officer		Director	. 🗆	General and/or Managing Partner
		(Last name first omas Rogerson		ividual)								
		r Residence Ado rnia Street, Su				, City, State, Zip C 94108	ode)					
Che	ck Box	(es) that Apply:		□ Promote	r 🗆	Beneficial Owne	r 🗵	Executive Officer		Director		General and/or Managing Partner
	Name , Mich	(Last name first	, if indi	vidual)								
		r Residence Add rnia Street, Sui				, City, State, Zip C 94108	ode)	·				
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		(Last name first Thristopher	, if indi	vidual)								
		r Residence Add rnia Street, Sui		(Number an San Francisc	d Street co, CA	City, State, Zip Co 94108	ode) .					Section 1
Che	ck Box	(es) that Apply:	:	□ Promote	r 🗆	Beneficial Owne	r 🗆	Executive Officer		Director		General and/or Managing Partner
Full	Name	(Last name first	, if indi	vidual)								
Busi	ness or	r Residence Add	iress	(Number and	d Street,	City, State, Zip Co	ode)					
			1	(Use blank s	heet. or	copy and use addit	ional cor	ies of this sheet, as	necess	arv.)		

requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate

					B. INFO	ORMATIO	N ABOUT	OFFERI	٧G				
1.	Has the is	suer sold, o	or does the	issuer inten	d to sell, to	non-accred	ited investo	ors in this o	ffering?			Yes	
					Answer al	so in Apper	ıdix, Colun	ın					$\boxtimes$
2.	N. N. W. C.											50,000	
3.	Does the	offering per	rmit joint o	wnership of	a single un	.it?		***************************************			•••••		
4.	Enter the similar reassociated	information nuneration person or	n requested for solicita agent of a b	for each pe tion of purc broker or de	erson who h hasers in co aler register	nas been or onnection w	will be paid ith sales of SEC and/o	l or given, securities in	directly or i	ndirectly, a g. If a perso	ny commiss on to be listene of the bro	ion or 🗵 dis an	
Full N/A	Name (Last	t name first	, if individu	ıal)									
Busi	ness or Res	idence Add	lress (Numl	per and Stat	e, City, Sta	te, Zip Cod	e)						
Nam	e of Associ	ated Broke	r or Dealer		•••			1. IV.				15050	· · · · · · · · · · · · · · · · · · ·
State	es in Which	Person Lis	ted Has So	licited or In	tends to So	licit Purcha	sers						
	(Check "A	Il States" o	r check ind	ividual Stat	es)							States	
	[ AL ]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[ GA ]	[HI]	[ ID
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Full	Name (Last	name first,	, if individu	al)									
Busi	ness or Resi	idence Add	ress (Numb	er and Stat	e, City, Sta	te, Zip Code	e)						
 Nam	e of Associa	ated Broker	or Dealer					1			1,-		
 State	s in Which	Person List	ted Has Sol	icited or In	tends to So	licit Purcha	sers		<del></del>				
	(Check "A	ll States" o	r check ind	ividual Stat	es)			••••••			🗆 All	States	
	[ AL ]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[ GA ]	[ HI ]	
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Full 1	Name (Last	name first,	if individu	al)									
 Busii	ness or Resi	dence Add	ress (Numb	er and State	e, City, Stat	te, Zip Code	<del></del>						
Name	e of Associa	ited Broker	or Dealer								·····		
State	s in Which	Person I ist	ed Has Sol	icited or Int	ends to Sol	licit Purchas	ers						
Jiale.											🗆 All :	States	
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# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$0	\$0
	Convertible Securities (including warrants)	<b>т</b> А	\$ 0
	Partnership Interests		
	• 9		\$ <u>14,642,859</u>
	Other (Specify)		\$0
	Total	<u>unlimited</u>	\$ <u>14,642,859</u>
2.	Answer also in Appendix, Column 3, if filing under ULOE.  Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	45	\$ <u>14,642,859</u>
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A	_	\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs	X	\$
	Legal Fees	$\boxtimes$	\$24,000
	Accounting Fees	X	\$ <u>15,425</u>
	Engineering Fees		\$0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify) Blue sky, certain custodian fees and fund compliance	X	\$27,899
	Total	X	\$74,753

	C. OFFERING PRICE, NUM	IBER OF INVESTORS, EXPENSES AND U	SE C	F PROC	CEEDS			
	b. Enter the difference between the aggregate Question 1 and total expenses furnished in respons "adjusted gross proceeds to the issuer"						\$	14,6568,106
5.	Indicate below the amount of the adjusted gross properties for each of the purposes shown. If the amount for and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in results.	any purpose is not known, furnish an estimate he total of the payments listed must equal the		Paymer Office Directo Affilia	ers, ors, &		P	ayments To Others
	Salaries and fees		ן \$		0		\$	0
	Purchase of real estate		ן \$		0		\$	0
	Purchase, rental or leasing and installation of	f machinery and equipment	J \$.		0		\$	0
	Construction or leasing of plant buildings ar	d facilities	ן \$		0		\$	0
	that may be used in evaluate for the assets of	ne value of securities involved in this offering or securities of another issuer pursuant to	□ <b>s</b>		0		s	0
							¢	0
								0
	Working capital		] 3.			П	Φ	<u>_</u>
	Other (specify): Investment Portfolio		<b>\$</b> .		0	X	\$	14,568,106
			<b>.</b> \$.		0		\$	0
	Column Totals		3 \$		0	X	\$	14,568,106
	Total Payments Listed (columns totals added	i)[	×.	\$	14,56	<u>8,106</u>	<u>i</u>	
		D. FEDERAL SIGNATURE						
signa	ssuer has duly caused this notice to be signed by t ture constitutes an undertaking by the issuer to fur nation furnished by the issuer to any non-accredite	nish to the U.S. Securities and Exchange Comr	nissi	on, upon	written	requ		
	(Print or Type) ort Asia Advisors Fund, LP	Signature Helical Zh		Date	ary 14	200	15	
Nam	of Signer (Print or Type)	Title of Signer (Print or Type)	~	,		,		
Mic		Managing Member, Newport Asia LLC, the Advisors Fund, LP	e Ge	neral Pa	rtner of	Nev	vpor	t Asia
		ATTENTION						
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11116	ntional impotatements of oursalons of	iaul vuitalitule leucial Cillilliai Vivial		J. 1966	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J.Y.	100	, , , ,